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Substitute for Form PTO-875									10633664			
CLAIMS AS FILED – PART I (Column 1) (Column 2)							1	SMALL ENTITY		OR 1	OTHER THAN SMALL ENTITY	
FOR			NUMBER FILED		NUMBE	NUMBER EXTRA		RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))								s	OR		s	
TOTAL CLAIMS (37 CFR 1.16(c))			•	minus 20		1		x \$=		OR	× \$=	
INDEPENDENT CLAIMS (37 CFR 1.16(b))			minus 3 = *				Ì	x \$=		OR	x \$=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))								+s =		OR	+s =	
* If the difference in column 1 is less than zero, enter "0" in column 2.							,	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED – PART II												
	C	LAIM	S AS AME	NUED	- PART II						OTHER	RTHAN
(olumn 1)		(Column 2)			SMALL ENTITY		OR		ENTITY
AMENDMENT A		RE	CLAIMS MAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))		5	Minus	<u>"20</u>	=		x \$=		OR	x \$=	
	Independent (37 CFR 1.16(b))		.3	Minus	<u>"3 _</u>	=		x s =		OR	x \$=	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						l	+ s =		OR	+ s=	
							-	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(C	olumn 1)		(Column 2)	(Column 3)				_		
AMENDMENT B		RE	CLAIMS MAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•		Minus	**	=		x \$=		OR	x \$=	
	Independent (37 CFR 1.16(b))	•	_	Minus	***	=	1	x \$=		OR	x \$=	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+\$ =		OR	+ \$ =	
							_	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
_		(C	olumn 1)		(Column 2)	(Column 3)	_		,	_		
AMENDMENT C		RE	CLAIMS MAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•		Minus	••	=		× \$=		OR	x \$=	
ENC	Independent (37 CFR 1.16(b))	•		Minus	***	=		× \$=		OR	x \$=	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ \$=		OR	+ \$=	
							_	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
Ι,	" If the "Highest	Numb	er Previously	Paid For	y in column 2, wri " IN THIS SPACE ' IN THIS SPACE	is less than 20), en	nter "20". er "3".		_		

In a rignest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.